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APPLICANTS

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** CONTINUING DATA *****

THIS APPLICATION IS A CON OF 09/059,663 04/13/1998 PAT 6,281,104
 WHICH IS A CON OF 08/631,445 04/12/1996 PAT 5,789,317 *CME*

** FOREIGN APPLICATIONS ***** *NONE* *CME*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/07/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>		
Verified and Acknowledged	<i>Cherubek</i> <i>CME</i> Initials		
STATE OR COUNTRY ID	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
	3	37	5

ADDRESS

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TITLE

Low temperature reflow method for filling high aspect ratio contacts

FILING FEE RECEIVED 1176	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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